PERMIT NO	



New Submittal	()
Resubmittal	()

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RESIDENT	TIAL BUILDING PERMIT AF	PPLICATON
Project Address		<del></del>
Legal Description: Lot Bl	ock Subdivision	
Owner:	11	
	ddress	Phone
Contractor:	Address	Diversi
		Phone
Water Available: Yes () No ()	Sewer Available:	Yes () No ()
Flood Prone Area: Yes () No ()	Drainage /Utility Easement:	res() No()
Electrical Provider: Yes ( )  Type of Permit Applied for: Residen	Gas Provider: Coserv () (	oncor ( )
Type of Permit Applied for: Resider	ntial () Multifamily () Tempora	ry Trailer () Special Event () New
Construction ( ) Addition/Alteration		1 <b>5</b> 1 () <b>6</b> ()
Other() Ab	ove Ground Pool () Below Grou	nd Pool ( ) Spa ( )
BUILDING DESCRIPTION		MATERIALS DESCRIPTION
Area AC Space	Type Foundat	
Total Area	Type Foundation Exterior Walls	
Number Stories		
No. Dwelling Unit	Kooning Firenlace	
Estimated Value	Plan #	Latest Revision Date:
Water Service Size		or Elevation
BUILDING DEPARTMENT USE C	NLY:	will be taken to:
Type of Construction	Zoned	
Occupancy Group		
	Fire Sprinkler Required Yes ( ) No ( )	
No. Req'd Parking	Bldg. Set Backs: Front	
No. Exits Req'd	Front/Side	Side
Plans Approved by		
	Fence included Yes ( ) No ( )	
Valuation \$	Permit Fee \$	<del></del>
Special Conditions:		
The Undersigned applicant certifies that the pr submitted at time of application. All provision specified herein or not. Granting of a permit d law regulating construction or the performance of application, the application and plan review on all lots. A certificate of Occupancy must b	s of laws and ordinances governing this open not presume to give authority to viole of construction. When a permit has no will expire. The city will not assume re	type of work will be complied with whether ate or cancel the provisions of any local or state t been issued within 180 days following the date sponsibility for workability of sanitary sewer
Signature	Date	<del></del>
Print Name		